

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.A.		12/9/99
O.I.P.E. CLASSIFIER		7	12-17-99
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		65372	1-10-00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/9/99
2	✓	✓	12/9/99
3	✓	✓	12/9/99
4	✓	✓	12/9/99
5	✓	✓	12/9/99
6	✓	✓	12/9/99
7	✓	✓	12/9/99
8	✓	✓	12/9/99
9	✓	✓	12/9/99
10	✓	✓	12/9/99
11	✓	✓	12/9/99
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13	✓	✓	12/9/99
14	✓	✓	12/9/99
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45	✓	✓	12/9/99
46	✓	✓	12/9/99
47	✓	✓	12/9/99
48	✓	✓	12/9/99
49	✓	✓	12/9/99
50	✓	✓	12/9/99

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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